

Please Type or Print Legibly

"Championing Scientific Careers" July 29–30, 2002

J. ROBERT OPPENHEIMER STUDY CENTER AND LOS ALAMOS RESEARCH PARK

Student & Postdoctoral Registration Form

Participant Name				
(Last Name)		(First Name)	(Middle Initial)	
Organization Name				
Organization Mailing Address				
City Co	Country		Zip Code	
Telephone		_Fax		
E-mail Address			_	
Name(s) of Guest(s)				
Please indicate if you will attend the	e following:			
Lunch, Tuesday, July 30 th	Yes 🔲	No 🔲		
Awards Banquet, Tuesday, July 30th	Yes 🗍	No 🗍		
, , , , , ,		J		
Symposium Fees	Fe	ee/Cost (US Dollars)	Amount	
Student or Postdoctoral Registration		\$125.00/person	\$	
Guest Lunch Ticket		15.00/person		
Guest Banquet Ticket		30.00/person		
		30.00/person Total	\$	
NOTE: Registration fee includes: book of awards banquet. Payment to be received. Method of Payment VISA Method of Payment on Credit Card)	d on or before	Total re-conference seminars, of June 28, 2002. Check (payable to	continental breakfast, lu	
NOTE: Registration fee includes: book of awards banquet. Payment to be received. Method of Payment VISA Method	d on or before	Total re-conference seminars, of June 28, 2002. Check (payable to	continental breakfast, lu	
NOTE: Registration fee includes: book of awards banquet. Payment to be received. Method of Payment VISA Method of Payment on Credit Card)	d on or before Master Card Person	Total re-conference seminars, of June 28, 2002. Check (payable to	continental breakfast, lu	
NOTE: Registration fee includes: book of awards banquet. Payment to be received. Method of Payment VISA Method of Payment on Credit Card) Credit Card (check one) Company	d on or before Master Card Person	Total re-conference seminars, of June 28, 2002. Check (payable to	continental breakfast, lui Symposium 2002)	
NOTE: Registration fee includes: book of awards banquet. Payment to be received. Method of Payment VISA Method of Payment on Credit Card) Credit Card (check one) Company (Credit Card No.	d on or before Master Card Person	Total re-conference seminars, of June 28, 2002. Check (payable to	continental breakfast, lui Symposium 2002)	

Marion Hutton Los Alamos National Laboratory Protocol Office, P.O. Box 1663, MS P366 Los Alamos, NM 87545 (505) 667-8451 voice • (505) 667-7530 fax





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Information Submittal Form

Please Type or Print Legibly			
Please fax or mail this form to Leah Sandoval	(at the address b	elow).	
Participant Name			
(Last Name) Organization Name	(First Name ₎		(Middle Initial)
organization Name			
Telephone	Fax		
E-mail Address			
Mentor Name			
Presentation Title			
Major Field of Study			
Please choose the academic field in which you	wish to be jud	ged:	
Bioscience Chemistry Computing	Earth & Spa	ce Sciences 🔲	Engineering
Materials Science Mathematics Non	-Technical 🔲	Physics	
Will you be presenting a Paper Presentation [(for paper presentations and poster specifications			_
LA-UR Number (Note, it how to			cions. For instructions about //set.lanl.gov/symposium/)
Please indicate which of the following pre-sym	nposium events	you wish to atte	nd:
Seminar 1 Academic/Life Success Seminar 1	minar 2 <i>Student</i>	to Permanent E	mployee 🔲
Seminar 3 Funding for Graduate School			

PLEASE RETURN THIS FORM VIA FAX OR MAIL TO:

Presenter/Abstract Information: Leah Sandoval

Los Alamos National Laboratory STB-EPO, P.O. Box 1663, MS M706 Los Alamos, NM 87545 (505) 665-8277 *voice* • (505) 665-6871 *fax*

